

Aug 02, 2016

SEAN F. McAVOY, CLERK

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF WASHINGTON

BRENDA BRYAN,

Plaintiff,

v.

CAROLYN W. COLVIN,  
Commissioner of Social Security,

Defendant.

No. 4:15-CV-05122-JTR

ORDER GRANTING  
DEFENDANT'S MOTION FOR  
SUMMARY JUDGMENT

**BEFORE THE COURT** are cross-Motions for Summary Judgment. ECF No. 14, 18. Attorney Cory J. Brandt represents Brenda Bryan (Plaintiff); Special Assistant United States Attorney Ryan Lu represents the Commissioner of Social Security (Defendant). The parties have consented to proceed before a magistrate judge. ECF No. 7. After reviewing the administrative record and briefs filed by the parties, the Court **GRANTS** Defendant's Motion for Summary Judgment and **DENIES** Plaintiff's Motion for Summary Judgment.

**JURISDICTION**

Plaintiff filed an application for Supplemental Security Income (SSI) on August 22, 2011, alleging disability since May 15, 2003, due to bipolar, post-traumatic stress disorder (PTSD), depression, anxiety, Hashimoto Disease, panic attacks, and asthma. Tr. 225-231, 305, 355. The application was denied initially and upon reconsideration. Tr. 157-169, 171-180. Administrative Law Judge (ALJ) Lori L. Freund held a hearing on October 10, 2013, and heard testimony

1 from Plaintiff and vocational expert Sharon Welter. Tr. 50-103. At the hearing,  
2 Plaintiff was represented by counsel and amended her onset date to August 22,  
3 2011. Tr. 56. The ALJ issued an unfavorable decision on April 4, 2014. Tr. 22-  
4 41. The Appeals Council denied review on October 16, 2015. Tr. 1-7. The ALJ's  
5 April 4, 2014, decision became the final decision of the Commissioner, which is  
6 appealable to the district court pursuant to 42 U.S.C. § 405(g). Plaintiff filed this  
7 action for judicial review on December 14, 2015. ECF No. 1, 4.

### 8 **STATEMENT OF FACTS**

9 The facts of the case are set forth in the administrative hearing transcript, the  
10 ALJ's decision, and the briefs of the parties. They are only briefly summarized  
11 here.

12 Plaintiff was 40 years old at the date of application and the amended date of  
13 onset. Tr. 225. Plaintiff completed high school and one year of college in 1994.  
14 Tr. 356, 875. She also attended a truck driving training program. Tr. 875. She last  
15 worked in September of 2003 as prep cook in a fast food restaurant. Tr. 356-357.  
16 Plaintiff reported she stopped working because of her conditions. Tr. 356.

### 17 **STANDARD OF REVIEW**

18 The ALJ is responsible for determining credibility, resolving conflicts in  
19 medical testimony, and resolving ambiguities. *Andrews v. Shalala*, 53 F.3d 1035,  
20 1039 (9th Cir. 1995). The Court reviews the ALJ's determinations of law de novo,  
21 deferring to a reasonable interpretation of the statutes. *McNatt v. Apfel*, 201 F.3d  
22 1084, 1087 (9th Cir. 2000). The decision of the ALJ may be reversed only if it is  
23 not supported by substantial evidence or if it is based on legal error. *Tackett v.*  
24 *Apfel*, 180 F.3d 1094, 1097 (9th Cir. 1999). Substantial evidence is defined as  
25 being more than a mere scintilla, but less than a preponderance. *Id.* at 1098. Put  
26 another way, substantial evidence is such relevant evidence as a reasonable mind  
27 might accept as adequate to support a conclusion. *Richardson v. Perales*, 402  
28 U.S. 389, 401 (1971). If the evidence is susceptible to more than one rational

1 interpretation, the court may not substitute its judgment for that of the ALJ.  
 2 *Tackett*, 180 F.3d at 1097. Nevertheless, a decision supported by substantial  
 3 evidence will be set aside if the proper legal standards were not applied in  
 4 weighing the evidence and making the decision. *Browner v. Secretary of Health*  
 5 *and Human Services*, 839 F.2d 432, 433 (9th Cir. 1988). If substantial evidence  
 6 supports the administrative findings, or if conflicting evidence supports a finding  
 7 of either disability or non-disability, the ALJ's determination is conclusive.  
 8 *Sprague v. Bowen*, 812 F.2d 1226, 1229-1230 (9th Cir. 1987).

### 9 SEQUENTIAL EVALUATION PROCESS

10 The Commissioner has established a five-step sequential evaluation process  
 11 for determining whether a person is disabled. 20 C.F.R. § 416.920(a); *see Bowen*  
 12 *v. Yuckert*, 482 U.S. 137, 140-142 (1987). In steps one through four, the burden of  
 13 proof rests upon the claimant to establish a *prima facie* case of entitlement to  
 14 disability benefits. *Tackett*, 180 F.3d at 1098-1099. This burden is met once the  
 15 claimant establishes that physical or mental impairments prevent her from  
 16 engaging in her previous occupations. 20 C.F.R. § 416.920(a)(4). If the claimant  
 17 cannot do her past relevant work, the ALJ proceeds to step five, and the burden  
 18 shifts to the Commissioner to show that (1) the claimant can make an adjustment to  
 19 other work, and (2) specific jobs exist in the national economy which the claimant  
 20 can perform. *Batson v. Comm'r of Soc. Sec. Admin.*, 359 F.3d 1190, 1193-1194  
 21 (2004). If the claimant cannot make an adjustment to other work in the national  
 22 economy, a finding of "disabled" is made. 20 C.F.R. § 416.920(a)(4)(v).

### 23 ADMINISTRATIVE DECISION

24 On April 4, 2014, the ALJ issued a decision finding Plaintiff was not  
 25 disabled as defined in the Social Security Act.

26 At step one, the ALJ found Plaintiff had not engaged in substantial gainful  
 27 activity since August 22, 2011, the date of application. Tr. 24.

28 At step two, the ALJ determined Plaintiff had the following severe

1 impairments: Hashimoto's disease; status post-septic arthritis of the left knee with  
2 Methicillin-resistant Staphylococcus aureus (MRSA); dermatitis; asthma; mood  
3 disorders, not otherwise specified; PTSD; generalized anxiety disorder, not  
4 otherwise specified; and personality disorder, not otherwise specified. Tr. 24.

5 At step three, the ALJ found Plaintiff did not have an impairment or  
6 combination of impairments that met or medically equaled the severity of one of  
7 the listed impairments. Tr. 24.

8 At step four, the ALJ assessed Plaintiff's residual function capacity and  
9 determined that from August 22, 2011, to October 31, 2012, and from November  
10 1, 2013, to the date of the ALJ decision that she had no exertional limitations, but  
11 had the following nonexertional limitations:

12 [T]he claimant would need to avoid exposure to airborne particulates,  
13 such as fumes, odors, dust, and gases. The claimant would work best  
14 away from the public. She could have superficial contact with  
15 coworkers, but she could not perform tandem tasks. She is capable of  
16 occasional decision-making and judgment making. She could adapt to  
17 occasional changes in the work setting. She could have occasional  
supervision.

18 Tr. 26. The ALJ identified Plaintiff's past relevant work as cook helper, janitor,  
19 rod tape operator, tractor-trailer-truck driver, dump truck driver, and "truck driver,  
20 light" Tr. 39. The ALJ concluded that for the above-mentioned time period  
21 Plaintiff was able to perform her past relevant work as a cook helper, janitor, rod  
22 tape operator, dump truck driver, and "truck driver, light" as generally performed.  
23 Tr. 38-39.

24 The ALJ made a separate residual functional capacity determination for  
25 November 1, 2012, to October 31, 2013, finding that Plaintiff retained the capacity  
26 to perform light work with the following limitations:

27 The claimant was able to lift up to 20 pounds occasionally and 10  
28

1 pounds frequently. The claimant was able to stand/walk four hours in  
2 an eight-hour workday and she was able to sit for six hours in an eight-  
3 hour workday. She was able to occasionally use her left lower  
4 extremity to operate foot controls. She could never climb ladders,  
5 ropes, and scaffolds. She could occasionally climb one flight of stairs  
6 or less, but she would need the use of a handrail. She could never crawl.  
7 She could occasionally balance on even ground. She needed to avoid  
8 walking on uneven terrain. She could occasionally stoop and crouch.  
9 She could never kneel on the left knee and occasionally kneel on the  
10 right knee. The claimant needed to avoid exposure to airborne  
11 particulates, such as fumes, odors, dust, and gases. She needed to avoid  
12 exposure to hazardous machinery, unprotected heights, and the  
13 operational control of moving machinery. The claimant would have  
needed to work away from the public. She could have had superficial  
contact with coworkers, but she could not have performed tandem  
tasks. She was capable of occasional decision-making and judgment  
making. She could have adapted to occasional changes in the work  
setting. She could have had occasional supervision.

14 Tr. 26. The ALJ concluded that for the above-mentioned time period Plaintiff was  
15 not able to perform her past relevant work. Tr. 39.

16 At step five, the ALJ determined that, considering Plaintiff's age, education,  
17 work experience and residual functional capacity, and based on the testimony of  
18 the vocational expert, there were other jobs that exist in significant numbers in the  
19 national economy Plaintiff could have performed from November 1, 2012, to  
20 October 31, 2013, including the jobs of mail clerk, office helper, and outside  
21 deliverer. Tr. 39-40.

22 The ALJ concluded Plaintiff was not under a disability within the meaning  
23 of the Social Security Act at any time from August 22, 2011, the date of  
24 application, through April 4, 2014, the date of the ALJ's decision. Tr. 41.

### 25 ISSUES

26 The question presented is whether substantial evidence supports the ALJ's  
27 decision denying benefits and, if so, whether that decision is based on proper legal  
28 standards. Plaintiff contends the ALJ erred by (1) failing to properly weigh the

1 opinions of medical sources; (2) failing to properly consider Plaintiff's credibility,  
 2 (3) failing to make a proper step four determination; and (4) failing to make a  
 3 proper step five determination.

## 4 DISCUSSION

### 5 A. Medical Opinions

6 Plaintiff argues that the ALJ failed to properly consider and weigh the  
 7 medical opinions expressed by Jan M. Kouzes, Ed.D., Tae-Im Moon, Ph.D., Shruti  
 8 Aggarwal, M.D., K. Blair Sampson, M.D., and Jack Carpenter, PT, DPT. ECF No.  
 9 14 at 8-14.

10 In weighing medical source opinions, the ALJ should distinguish between  
 11 three different types of physicians: (1) treating physicians, who actually treat the  
 12 claimant; (2) examining physicians, who examine but do not treat the claimant;  
 13 and, (3) nonexamining physicians who neither treat nor examine the claimant.  
 14 *Lester v. Chater*, 81 F.3d 821, 830 (9th Cir. 1995). The ALJ should give more  
 15 weight to the opinion of a treating physician than to the opinion of an examining  
 16 physician. *Orn v. Astrue*, 495 F.3d 625, 631 (9th Cir. 2007). The ALJ should give  
 17 more weight to the opinion of an examining physician than to the opinion of a  
 18 nonexamining physician. *Id.*

19 When a treating physician's opinion is not contradicted by another  
 20 physician, the ALJ may reject the opinion only for "clear and convincing" reasons.  
 21 *Baxter v. Sullivan*, 923 F.2d 1391, 1396 (9th Cir. 1991). When a treating  
 22 physician's opinion is contradicted by another physician, the ALJ is only required  
 23 to provide "specific and legitimate reasons" for rejecting the opinion of the first  
 24 physician. *Murray v. Heckler*, 722 F.2d 499, 502 (9th Cir. 1983). Likewise, when  
 25 an examining physician's opinion is not contradicted by another physician, the  
 26 ALJ may reject the opinion only for "clear and convincing" reasons. *Lester*, 81  
 27 F.2d at 830. When an examining physician's opinion is contradicted by another  
 28 physician, the ALJ is only required to provide "specific and legitimate reasons" for

1 rejecting the opinion of the examining physician. *Id.* at 830-831.

2 The specific and legitimate standard can be met by the ALJ setting out a  
3 detailed and thorough summary of the facts and conflicting clinical evidence,  
4 stating her interpretation thereof, and making findings. *Magallanes v. Bowen*, 881  
5 F.2d 747, 751 (9th Cir. 1989). The ALJ is required to do more than offer her  
6 conclusions, she “must set forth [her] interpretations and explain why they, rather  
7 than the doctors’, are correct.” *Embrey v. Bowen*, 849 F.2d 418, 421-422 (9th Cir.  
8 1988).

9 **1. Jan M. Kouzes, Ed.D.**

10 On July 22, 2011, Dr. Kouzes completed a Psychological/Psychiatric  
11 Evaluation at the request of the Washington Department of Social and Health  
12 Services (DSHS), which included a mental status exam. Tr. 875-880. Dr. Kouzes  
13 diagnosed Plaintiff with major depressive disorder and panic disorder without  
14 agoraphobia. Tr. 877. She opined that Plaintiff had a marked<sup>1</sup> limitation in the  
15 abilities to communicate and perform in a work setting with public contact and  
16 maintain appropriate behavior in a work setting. Tr. 878. She opined Plaintiff had  
17 a moderate<sup>2</sup> limitation in the abilities to learn new tasks, to perform routine tasks  
18 without undue supervision, to be aware of normal hazards and take appropriate  
19 precautions, and to communicate and perform effectively in a work setting with  
20 limited public contact. Tr. 877-878. Dr. Kouzes estimated that Plaintiff would be  
21 impaired to the above degree from three months to nine months. Tr. 878.

22 On February 21, 2013, Dr. Kouzes completed a second  
23 Psychological/Psychiatric Evaluation at the request of DSHS, which included a  
24 mental status exam. Tr. 1066-1070. Dr. Kouzes gave Plaintiff the same diagnosis  
25 as in the prior evaluation. Tr. 1067. Dr. Kouzes opined that Plaintiff would have a  
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27 <sup>1</sup>Marked is defined as “[v]ery significant interference.” Tr. 877.

28 <sup>2</sup>Moderate is defined as [s]ignificant in[ter]ference.” Tr. 877.



1 marked<sup>3</sup> limitation in the abilities to understand, remember, and persist in tasks by  
2 following detailed instructions, to communicate and perform effectively in a work  
3 setting, to complete a normal work day and work week without interruptions from  
4 psychologically based symptoms, to maintain appropriate behavior in a work  
5 setting, and to set realistic goals and plan independently. Tr. 1068. She also  
6 opined that Plaintiff would have a moderate<sup>4</sup> limitation in the abilities to perform  
7 activities within a schedule, maintain regular attendance, and be punctual within  
8 customary tolerances without special supervision, to learn new tasks, to perform  
9 routine tasks without special supervision, to adapt to changes in a routine work  
10 setting, to make simple work-related decisions, to be aware of normal hazards and  
11 take appropriate precautions, and to ask simple questions or request assistance. *Id.*  
12 Dr. Kouzes estimated that Plaintiff would have the above limitations for 12  
13 months. Tr. 1069.

14 The ALJ gave both of Dr. Kouzes' opinions little weight because (1) she  
15 was not a treating provider, (2) she gave only cursory explanations on her  
16 evaluation form to support her opinions, (3) she did not administer clinical testing  
17 aside from mental status examinations, and (4) her opined cognitive limitations  
18 were inconsistent with IQ and memory testing in the record. Tr. 34.

19 The ALJ's first reason for rejecting Dr. Kouzes' opinions that Dr. Kouzes  
20 was not a treating physician, was not a sufficient reason to reject the opinion. An  
21 ALJ is to consider the examining relationship and treatment relationship in  
22 weighing opinions, 20 C.F.R. § 416.927(c), and to give greater weight to a treating  
23 physician over an examining physician, *Orn*, 495 F.3d at 631. However, in this  
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25 <sup>3</sup>Marked "means a very significant limitation on the ability to perform one or  
26 more basic work activity." Tr. 1068.

27 <sup>4</sup>Moderate "means there are significant limits on the ability to perform one  
28 or more basic work activity." Tr. 1068.



1 case there is no opinion from a treating psychologist. Therefore, this reason is not  
2 sufficient to reject Dr. Kouzes' opinion while giving greater weight to another  
3 examining psychologist. However, this error is harmless because the ALJ has  
4 provided other legally sufficient reasons for rejecting Dr. Kouzes' opinions. *See*  
5 *Tommasetti v. Astrue*, 533 F.3d 1035, 1038 (9th Cir. 2008) (an error is harmless  
6 when "it is clear from the record that the . . . error was inconsequential to the  
7 ultimate nondisability determination").

8 The second reason the ALJ provided for rejecting Dr. Kouzes' opinions, that  
9 she gave only cursory explanations on her evaluation form to support her opinions,  
10 is legally sufficient. An ALJ can reject an opinion that is brief, conclusory, and  
11 inadequately supported by clinical findings. *Thomas v. Barnhart*, 278 F.3d 947,  
12 957 (9th Cir. 2002). Additionally, ALJ my reject check-off reports that do not  
13 contain any explanation of the basis of their conclusions. *Molina v. Astrue*, 674  
14 F.3d 1104, 1111 (9th Cir. 2012). However, unexplained check-off forms that are  
15 based on significant experience with the claimant and supported by treatment  
16 records should not be rejected simply because of their format. *Garrison v. Colvin*,  
17 759 F.3d 995, 1013 (9th Cir. 2014).

18 Here, Dr. Kouzes' July 2011 opinion was on a check-off form with  
19 observations noted in three of the eight limitations addressed. Tr. 877-878. Two  
20 of the three observations were for abilities in which Plaintiff had no limitation or  
21 only a mild limitation. Tr. 877. The third observation was that Plaintiff could  
22 perform her activities of daily living as an explanation for a moderate limitation in  
23 the ability to perform routine tasks without undue supervision. Tr. 878. However,  
24 a doctor's observation that Plaintiff is capable of performing her activities of daily  
25 living is not support for a moderate limitation. Additionally, the opinion was not  
26 supported by significant experience with Plaintiff. It was based on a one-time  
27 Mental Status Exam and the review of a DSHS intake form. Tr. 875, 877, 879-  
28 880. Therefore, the ALJ's finding that Dr. Kouzes only provided "cursory

1 explanations” is supported by substantial evidence and was a specific and  
2 legitimate reason to reject the July 2011 opinion.

3 Dr. Kouzes’ February 2013 opinion was a check-off form void of any  
4 explanation for the limitations indicated. Tr. 1068. She did not have any  
5 significant experience with Plaintiff as she was only an examining psychologist  
6 who had seen Plaintiff almost two years prior and had not participated in treatment.  
7 Additionally, her opinion was based on a mental status exam and a review of Dr.  
8 Moon’s August 2012 DSHS Psychological Evaluation, which the ALJ also  
9 rejected. Tr. 1066, 1069-1070. Therefore, this is a specific and legitimate reason  
10 to reject the opinion.

11 The ALJ’s third reason for rejecting Dr. Kouzes’ opinions, that she did not  
12 administer clinical testing aside from mental status examinations, is legally  
13 sufficient. As discussed below, the clinical testing that has been performed is  
14 inconsistent with Dr. Kouzes’ opinions. Dr. Kouzes’ did not review any of the  
15 clinical testing in Plaintiff’s file as a part of either evaluation, nor did she perform  
16 her own clinical testing. Tr. 875-880, 1066-1070. Therefore, the ALJ’s decision  
17 to give greater weight to the opinion of Dr. Dougherty because he provided clinical  
18 testing results, Tr. 34, 849-850, over Dr. Kouzes’ opinions is acceptable as Dr.  
19 Dougherty based his opinion on more objective testing. Therefore, this is a  
20 specific and legitimate reason to reject the opinions.

21 The ALJ’s fourth reason for rejecting Dr. Kouzes’ opinions, that the  
22 cognitive limitations were inconsistent with the IQ and memory testing, is legally  
23 sufficient. Inconsistency with the majority of objective evidence is a specific and  
24 legitimate reason for rejecting physician’s opinions. *Batson*, 359 F.3d at 1195.  
25 The record shows that in 1986, Plaintiff had an average full scale IQ score of 103  
26 on the Wechsler Intelligence Scale for Children. Tr. 383-384. In March of 2007,  
27 she had an average full scale IQ score of 98 on the Wechsler Adult Intelligence  
28 Scale-III (WAIS-III). Tr. 541, 550, 552. In October of 2010, Plaintiff scored in

1 the average range of intelligence on a Kaufman Brief Intelligence Test (K-BIT).  
2 Tr. 849. Having an average IQ score is inconsistent with Dr. Kouzes' finding of  
3 cognitive limitations and meets the specific and legitimate standard.

4 Additionally, Plaintiff scored average or above average on the Wechsler  
5 Memory Scale-III (WMS-III) in March of 2007 and October of 2010. Tr. 550,  
6 560, 849. This is inconsistent with Dr. Kouzes' findings of limitations associated  
7 with memory loss and meets the specific and legitimate standard. The Court is  
8 aware that in February of 2012, Plaintiff was administered the Digit Span subtest  
9 of the Wechsler Adult Intelligence Scale-IV (WAIS-IV), in which she scored in the  
10 low average range. Tr. 897. CeCelia Cooper, Ph.D. stated that this showed  
11 Plaintiff's short term memory to be impaired, but not her immediate memory. Tr.  
12 898. However, the ALJ rejected Dr. Cooper's opinion because it was based on a  
13 single subtest of the WAIS-IV and, instead, relied upon Dr. Dougherty's opinion  
14 which was based on the entire WMS-III. Tr. 34. The Digit Span subtest is one of  
15 two subtests in the Working Memory index administered in the WAIS-IV.<sup>5</sup> The  
16 WMS-III consists of seven index scores drawn from eleven subtests focused on  
17 memory. Tr. 560-562. Therefore, the ALJ's decision to rely on a conclusion  
18 drawn from more comprehensive testing over a single subtest meets the specific  
19 and legitimate standard required to support a rejection of Dr. Cooper's opinion  
20 and, in turn, Dr. Kouzes' opinion as well.

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22 <sup>5</sup>The WAIS-IV consists of four index scales, including Verbal  
23 Comprehension, Perceptual Reasoning, Working Memory, and Processing Speed.  
24 The Working Memory index scale is calculated based on two subtests, Digit Span  
25 and Arithmetic. Gary L. Canivez, Jason M. Nelson & Marley W. Watkins,  
26 *Structural and Incremental Validity of the Wechsler Adult Intelligence Scale-*  
27 *Fourth Edition with a Clinical Sample*, 25 Psychological Assessment 618, 620  
28 (2013), [http://edpsychassociates.com/Papers/WAIS-IVclinical\(2013\).pdf](http://edpsychassociates.com/Papers/WAIS-IVclinical(2013).pdf).

1 In conclusion, there was no harmful error in the ALJ's decision to reject Dr.  
2 Kouzes' opinions.

3 **2. Tae-Im Moon, Ph.D.**

4 On August 16, 2012, Dr. Moon completed a Psychological/Psychiatric  
5 Evaluation form for DSHS following a clinical interview and a mental status exam.  
6 Tr. 927-931. Dr. Moon opined that Plaintiff had a marked limitation in the abilities  
7 to understand, remember, and persist in tasks by following detailed instructions, to  
8 learn new tasks, to adapt to changes in a routine work setting, to communicate and  
9 perform effectively in a work setting, to complete an normal work day and work  
10 week without interruptions from psychologically based symptoms, to maintain  
11 appropriate behavior in a work setting, and to set realistic goals and plan  
12 independently. Tr. 929. Dr. Moon opined that Plaintiff had a moderate limitation  
13 in the abilities to perform activities within a schedule, maintain regular attendance,  
14 and be punctual within customary tolerances without special supervision, to  
15 perform routine tasks without special supervisions, to make simple work-related  
16 decisions, to be aware of normal hazards and take appropriate precautions, and to  
17 ask simple questions or request assistance.<sup>6</sup> *Id.* Dr. Moon stated that he would  
18 expect the above limitations to be present from 18 months to an undeterminable  
19 number of months. Tr. 930.

20 The ALJ gave Dr. Moon's opinion "little weight" because (1) the opinion  
21 was based on a one time evaluation by an examining provider, (2) the opinion was  
22 based on Plaintiff's self-reports and a mini-mental status examination, (3) the  
23 opinion was inconsistent with objective testing, and (4) the opinion was  
24 inconsistent with Plaintiff's activities. Tr. 35-36.

25 The ALJ's first reason for rejecting Dr. Moon's opinion was not legally  
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27 <sup>6</sup>The definitions of marked and moderate limitations are the same definitions  
28 used in Dr. Kouzes' February 2013 opinion. Tr. 929.

1 sufficient. As discussed above, the fact that the opinion was by an examining  
2 provider is not a legally sufficient reason to reject an examining physician's  
3 opinion in favor of another examining physician. However, any error resulting  
4 from this reason is harmless.

5 The ALJ's second reason for rejecting Dr. Moon's opinion, that it was based  
6 on Plaintiff's self-reports and a mini-mental status examination, is a legally  
7 sufficient reason to reject the opinion in favor of Dr. Dougherty's opinion. Dr.  
8 Moon did not review any other evaluations or treatment notes as part of his  
9 evaluation; the medical history he considered were Plaintiff's statements. Tr. 927.  
10 Dr. Moon then completed a mental status exam. Tr. 930-931. This is in contrast to  
11 Dr. Dougherty's opinion, which was formed after an interview, a review of records  
12 provided by her child's social worker, the Minnesota Multiphasic Personality  
13 Inventory-2, Millian Clinical Multiaxial Inventory-III, Rorschach Test, K-BIT,  
14 Trauma Symptoms Inventory, and WMS-III. Tr. 855-861. Substantial evidence  
15 supports that Dr. Dougherty's opinion was based on more objective evidence than  
16 Dr. Moon's opinion. Therefore this is a specific and legitimate reason to reject Dr.  
17 Moon's opinion.

18 The ALJ's third reason for rejecting Dr. Moon's opinion, that it was  
19 inconsistent with objective evidence, is legally sufficient. Inconsistency with the  
20 majority of objective evidence is a specific and legitimate reason for rejecting  
21 physician's opinions. *Batson*, 359 F.3d at 1195. The ALJ noted that Plaintiff's IQ  
22 tests and WMS-III tests, discussed in detail above, show that Plaintiff had no  
23 significant limitation in her cognitive abilities. Tr. 35-36. This is a specific and  
24 legitimate reason to reject Dr. Moon's opinion.

25 The ALJ's fourth reason for rejecting Dr. Moon's opinion, that it was  
26 inconsistent with Plaintiff's activities, is legally sufficient. The ALJ noted that  
27 Plaintiff's lack of cognitive limitations is further supported by her reported  
28 activities of beading, woodworking, selling items on Craig's list, helping her friend

shop, cook and run errands, and reading for hours; therefore, Plaintiff's activities were inconsistent with Dr. Moon's cognitive limitations. Tr. 36. A claimant's testimony about her daily activities may be seen as inconsistent with the presence of a disabling condition. *See Curry v. Sullivan*, 925 F.2d 1127, 1130 (9th Cir. 1990). While the ALJ found Plaintiff to be less than fully credible concerning the intensity, persistence, and limiting effects of her symptoms, he did so by crediting her testimony about her daily activities. *See infra*. Therefore, this is a legally sufficient reason for rejecting Dr. Moon's opinion.

The ALJ did not commit any harmful legal error in her treatment of Dr. Moon's opinion.

### **3. Shruti Aggarwal, M.D.**

On March 12, 2013, Dr. Aggarwal stated in a patient plan that Plaintiff should "[a]void lifting heavy weight," and "[a]dvised bed rest in acute cases," referring to Plaintiff's left knee. Tr. 955.

The ALJ gave Dr. Aggarwal's March 12, 2013, statements "little weight" because (1) the opinion was based on Plaintiff's complaints of joint pain, (2) the limitations given were vague, and (3) it was inconsistent with a normal examination on March 5, 2013. Tr. 38.

On March 4, 2013, Dr. Aggarwal completed an evaluation and a DSHS Physical Functional Evaluation form. Tr. 1072-1078. On the DSHS form, Dr. Aggarwal indicated that Plaintiff was "[s]everly limited" meaning that she was "[u]nable to meet the demands of sedentary work." Tr. 1074. He stated that it was difficult to comment on how long the limitation would last and did not complete that portion of the form. *Id.*

The ALJ gave the opinion expressed on this DSHS form "little weight" because (1) it was inconsistent with a normal evaluation on March 5, 2013, and (2) it was inconsistent with Plaintiff's testimony. Tr. 38.

Plaintiff challenges the weight the ALJ gave to the opinion in the March 4,



1 2013, DSHS form, but only presents challenges to the reasons the ALJ provided  
2 for rejecting the March 12, 2013, statements. ECF No. 14 at 11. Despite  
3 Plaintiff's somewhat mismatched challenges, the ALJ provided legally specific  
4 reasons for rejecting both of Dr. Aggarwal's opinions.

5 The ALJ's first reason for rejecting the March 12, 2013, statements, that it  
6 was based on Plaintiff's complaints of joint pain, is legally sufficient. A doctor's  
7 opinion may be discounted if it relies on a claimant's unreliable self-report.  
8 *Bayliss v. Barnhart*, 427 F.3d 1211, 1217 (9th Cir. 2005); *Tommasetti*, 533 F.3d at  
9 1041. But the ALJ must provide the basis for her conclusion that the opinion was  
10 based on a claimant's self-reports. *Ghanim v. Colvin*, 763 F.3d 1154, 1162 (9th  
11 Cir. 2014). Here, the ALJ concluded that the opinion was based on Plaintiff's  
12 reports of joint pain because there were no physical examination results  
13 accompanying the opinion. Tr. 38. The ALJ provided a rationale for her  
14 conclusion that the opinion was based on Plaintiff's self-reports and not on  
15 objective evidence. Therefore, this reason meets the specific and legitimate  
16 reason.

17 The ALJ's second reason for rejecting the March 12, 2013, statements, that  
18 the limitations given were vague, is legally sufficient. The phrases "[a]void lifting  
19 heavy weight," and "[a]dvised bed rest in acute cases" are vague as they are not  
20 presented in occupational terms. It leaves what constitutes "heavy weight" and the  
21 frequency of "acute cases" undefined and unable to put into a residual functional  
22 capacity analysis. This is a specific and legitimate reason to reject the opinion.

23 The ALJ's third reason for rejecting the March 12, 2013, statements, that the  
24 opinion was inconsistent with a normal examination on March 5, 2013, that stated  
25 there were normal range of motion, muscle strength, and stability in all extremities,  
26 is legally sufficient. While, there is no evaluation performed on March 5, 2013,  
27 there is an evaluation performed by Dr. Aggarwal on March 4, 2013, in which he  
28 stated "[n]ormal range of motion, muscle strength, and stability in all extremities



1 with no pain on inspection.” Tr. 1077. Therefore, it is obvious that the ALJ’s  
2 reference to the March 5, 2013, evaluation is a reference to Dr. Aggarwal’s March  
3 4, 2013, evaluation and simply a scribner’s error. The ALJ may reject a medical  
4 opinion that is “inadequately supported by clinical findings.” *Thomas*, 278 F.3d at  
5 957. This evaluation contained normal findings throughout the physical  
6 evaluation. Tr. 1077-1078. Therefore the ALJ’s determination is supported by  
7 substantial evidence and meets the legitimate and specific standard.

8 The March 4, 2013, evaluation was also the ALJ’s first reason for rejecting  
9 the March 4, 2013, opinion. Tr. 38. Again, since the evaluation contained only  
10 normal findings upon physical evaluation, Tr. 1077-1078, the ALJ’s determination  
11 that these findings were inconsistent with Dr. Aggarwal’s opinion that Plaintiff  
12 was “severely limited” is supported by substantial evidence and is legally sufficient  
13 under *Thomas*.

14 The ALJ’s second reason for rejecting the March 4, 2013, opinion, that it  
15 was inconsistent with Plaintiff’s testimony, is legally sufficient. The claimant’s  
16 testimony about her daily activities may be seen as inconsistent with the presence  
17 of a disabling condition. *See Curry*, 925 F.2d at 1130. Plaintiff testified that she  
18 was able to be on her feet standing and walking for a total of four to five hours  
19 with breaks since January 2013. Tr. 62-63. This is inconsistent with Dr.  
20 Aggarwal’s opinion that she would be unable to meet the demands of sedentary  
21 work, which includes the ability to walk or stand for brief periods. Therefore, this  
22 is a specific and legitimate reason to reject the opinion.

23 The ALJ did not error in her treatment of Dr. Aggarwal’s opinion.

24 **4. K. Blair Sampson, M.D.**

25 In January of 2013,<sup>7</sup> Dr. Sampson completed a DSHS Physical Functional  
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27 <sup>7</sup>The date Dr. Sampson indicated on the form was January 3, 2011, however,  
28 the Court assumes this was in error and that the examination took place in January

1 Evaluation form in which he opined that Plaintiff was “[s]everly limited,” which is  
2 defined as “[u]nable to meet the demands of sedentary work.” Tr. 1047-1049. He  
3 indicated this level of impairment would last three months with available medical  
4 treatment. Tr. 1049.

5 The ALJ gave Dr. Sampson’s opinion “little weight” because (1) it was  
6 inconsistent with a normal evaluation on March 5, 2013, and (2) it was inconsistent  
7 with Plaintiff’s testimony. Tr. 38.

8 These reasons are supported by substantial evidence and are legally  
9 sufficient as discussed above in reference to Dr. Aggarwal’s March 4, 2013,  
10 opinion, which also ranked Plaintiff as “severely limited.”

11 **5. Jack Carpenter, PT, DPT**

12 On January 18, 2013, Mr. Carpenter completed a DSHS Physical Functional  
13 Evaluation form. Tr. 1038-1040. Mr. Carpenter opined that Plaintiff was limited  
14 to sedentary work, defined as “[a]ble to lift 10 pounds maximum and frequently lift  
15 or carry lightweight articles. Able to walk or stand only for brief periods.” Tr.  
16 1040. Mr. Carpenter stated that he expected the above limitation to persist for six  
17 months with available medical treatment. *Id.*

18 The ALJ gave Mr. Carpenter’s opinion “little weight” because (1) it was  
19 inconsistent with a normal evaluation on March 5, 2013, and (2) it was inconsistent  
20 with Plaintiff’s testimony. Tr. 38.

21 Unlike Dr. Kouzes, Dr. Moon, Dr. Aggarwal, and Dr. Sampson, Mr.  
22 Carpenter is not an acceptable medical source; instead, he is considered an “other  
23 source.” *See* 20 C.F.R. § 416.913(d). Generally, the ALJ should give more weight  
24 to the opinion of an acceptable medial source than to the opinion of an “other

25 \_\_\_\_\_  
26 of 2013 because the DSHS worker sent the form on December 18, 2012, Tr. 1049,  
27 and Plaintiff gave consent for Dr. Sampson to release medical information to  
28 DSHS on January 11, 2013, Tr. 1047.

1 source,” such as a therapist. 20 C.F.R. § 416.913(d). An ALJ is required,  
2 however, to consider evidence from “other sources,” 20 C.F.R. § 416.913(d);  
3 S.S.R. 06-03p, “as to how an impairment affects a claimant’s ability to work,”  
4 *Sprague*, 812 F.2d at 1232. An ALJ must give reasons that are specific and  
5 germane to each “other source” to discount their opinions. *Dodrill v. Shalala*, 12  
6 F.3d 915, 919 (9th Cir. 1993); *Stout v. Comm’r of Soc. Sec. Admin.*, 454 F.3d 1050,  
7 1053-1054 (9th Cir. 2006).

8 First, as discussed at length above, the March 4, 2013, evaluation revealed  
9 all normal findings on physical examination. This is inconsistent with a limitation  
10 to sedentary work. Therefore, this is a legally sufficient reason to reject Mr.  
11 Carpenter’s opinion.

12 Second, the ability to stand or walk for four or five hours with breaks, as  
13 Plaintiff testified, Tr. 62-63, is not inconsistent with the ability to perform  
14 sedentary work, which requires the ability to walk or stand only for brief periods.  
15 However, since the ALJ’s first reason meets the germane standard, any error  
16 resulting from the ALJ’s second reason is harmless. *See Tommasetti*, 533 F.3d at  
17 1038 (an error is harmless when “it is clear from the record that the . . . error was  
18 inconsequential to the ultimate nondisability determination”).

## 19 **B. Credibility**

20 Plaintiff contests the ALJ’s adverse credibility determination in this case.  
21 ECF No. 14 at 14-17.

22 It is generally the province of the ALJ to make credibility determinations,  
23 *Andrews*, 53 F.3d at 1039, but the ALJ’s findings must be supported by specific  
24 cogent reasons, *Rashad v. Sullivan*, 903 F.2d 1229, 1231 (9th Cir. 1990). Absent  
25 affirmative evidence of malingering, the ALJ’s reasons for rejecting the claimant’s  
26 testimony must be “specific, clear and convincing.” *Smolen v. Chater*, 80 F.3d  
27 1273, 1281 (9th Cir. 1996); *Lester*, 81 F.3d at 834. “General findings are  
28 insufficient: rather the ALJ must identify what testimony is not credible and what

evidence undermines the claimant's complaints." *Lester*, 81 F.3d at 834.

The ALJ found Plaintiff less than fully credible concerning the intensity, persistence, and limiting effects of her symptoms because (1) Plaintiff's daily activities were inconsistent with her allegations, (2) the objective medical evidence was inconsistent with the severity of alleged mental health impairments, and (3) the alleged mental health impairments were inconsistent with the limited mental health treatment sought during the relevant time period. Tr. 28-29.

The ALJ's first reason for finding Plaintiff less than fully credible, that Plaintiff's daily activities were inconsistent with her alleged impairments, is legally sufficient. A claimant's daily activities may support an adverse credibility finding if (1) the claimant's activities contradict her other testimony, or (2) "the claimant is able to spend a substantial part of his day engaged in pursuits involving performance of physical functions that are transferable to a work setting." *Orn*, 495 F.3d at 639 (citing *Fair v. Bowen*, 885 F.2d 597, 603 (9th Cir. 1989)). A claimant need not be "utterly incapacitated" to be eligible for benefits. *Fair*, 885 F.2d at 603.

Here, the ALJ summarized Plaintiff's activities, including her ability to read romance novels three to four hours per day, do beadwork and make dream catchers, use a computer to sell items on Craig's list, take walks because she felt claustrophobic, run errands for a visually impaired friend, and ride her bike. Tr. 32-33. The ALJ determined that despite Plaintiff's testimony to the contrary, these activities showed Plaintiff could interact socially, she was able to understand, remember, and carryout tasks, she could maintain concentration, persistence, and pace, and she had regained some strength in her left knee. Tr. 33. The Court finds that the ALJ's conclusion that Plaintiff's activities were inconsistent with her testimony is supported by substantial records and meets the specific, clear and convincing standard.

The ALJ's second reason for finding Plaintiff less than fully credible, that

1 the objective medical evidence was inconsistent with the severity of mental health  
2 limitations alleged, is legally sufficient. Objective medical evidence is a “relevant  
3 factor” in determining the severity of claimant’s impairments and their disabling  
4 effects, it cannot serve as the sole ground for rejecting a claimant’s credibility.  
5 *Rollins v. Massanari*, 261 F.3d 853, 857 (9th Cir. 2001). Here, the ALJ noted that  
6 throughout treatment records, Plaintiff reported a head injury in 2003 resulting in  
7 memory difficulties, however, the intelligence and memory testing showed no  
8 cognitive or memory limitations. Tr. 28-29. As discussed in detail above, the  
9 objective testing does not support Plaintiff’s reports of cognitive and memory  
10 limitations. As such, the ALJ’s determination that these allegations are not  
11 supported by substantial evidence meets the specific, clear and convincing  
12 standard.

13 The ALJ’s third reason for finding Plaintiff less than fully credible, that her  
14 lack of mental health treatment during the relevant time period was inconsistent  
15 with her alleged impairments, is not a legally sufficient reason. Noncompliance  
16 with medical care or unexplained or inadequately explained reasons for failing to  
17 seek medical treatment cast doubt on a claimant’s subjective complaints. 20  
18 C.F.R. §§ 404.1530, 416.930; *Fair*, 885 F.2d at 603. But, a claimant’s failure to  
19 follow a course of treatment may be excused if the claimant cannot afford the  
20 treatment. *Gamble v. Chater*, 68 F.3d 319, 321 (9th Cir. 1995).

21 The ALJ failed to consider Plaintiff’s ability to afford treatment when  
22 making her adverse credibility determination. Therefore, this reason does not meet  
23 the specific, clear and convincing standard. However, any error resulting from this  
24 determination would be harmless considering the ALJ provided other legally  
25 sufficient reasons for rejecting Plaintiff’s credibility. See *Carmickle v. Comm’r.,*  
26 *Soc. Sec. Admin.*, 533 F.3d 1155, 1163 (9th Cir. 2008) (upholding an adverse  
27 credibility finding where the ALJ provided four reasons to discredit the claimant,  
28 two of which were invalid); *Batson*, 359 F.3d at 1197 (affirming a credibility

1 finding where one of several reasons was unsupported by the record); *Tommasetti*,  
2 533 F.3d at 1038 (an error is harmless when “it is clear from the record that the . . .  
3 error was inconsequential to the ultimate nondisability determination”).

#### 4 **C. Step Four**

5 Plaintiff challenges the ALJ’s step four determination, stating that the ALJ  
6 failed to meet the requirements of S.S.R. 82-62. ECF No. 14 at 17-19.

7 The claimant has the burden of proving she can no longer perform past  
8 relevant work. 20 C.F.R. §§ 416.912(a), 416.920(f); *Tackett*, 180 F.3d at 1098-  
9 1099. To find that a claimant has the capacity to perform a past relevant job, the  
10 ALJ must make the following findings of fact: (1) the individual’s residual  
11 functional capacity; (2) the physical and mental demands of the past  
12 job/occupation; (3) that the individual’s residual functional capacity would permit  
13 a return to her past job or occupation. S.S.R. 82-62.

14 First Plaintiff argues that the ALJ erred by failing to include all of Plaintiff’s  
15 limitations in the residual functional capacity determination by rejecting the  
16 various treating and examining providers discussed above. ECF No. 14 at 18.  
17 However, the Court finds that the ALJ provided legally sufficient reasons for  
18 rejecting these opinions. Therefore, the ALJ did not error in her residual functional  
19 capacity determination.

20 Second, Plaintiff argues that the ALJ failed to identify the specific demands  
21 of Plaintiff’s past relevant work. ECF No. 14 at 18. Plaintiff’s argument is one  
22 sentence long and is unsupported. *Id.* The court ordinarily will not consider  
23 matters on appeal that are not specifically and distinctly argued in an appellant’s  
24 opening brief. *See Carmickle*, 533 F.3d at 1161 n.2. The Ninth Circuit explained  
25 the necessity for providing specific argument:

26 The art of advocacy is not one of mystery. Our adversarial system relies  
27 on the advocates to inform the discussion and raise the issues to the  
28 court. Particularly on appeal, we have held firm against considering  
arguments that are not briefed. But the term “brief” in the appellate



context does not mean opaque nor is it an exercise in issue spotting. However much we may importune lawyers to be brief and to get to the point, we have never suggested that they skip the substance of their argument in order to do so. It is no accident that the Federal Rules of Appellate Procedure require the opening brief to contain the “appellant’s contentions and the reasons for them, with citations to the authorities and parts of the record on which the appellant relies.” Fed. R. App. P. 28(a)(9)(A).<sup>[8]</sup> We require contentions to be accompanied by reasons.

*Independent Towers of Wash. v. Wash.*, 350 F.3d 925, 929 (9th Cir. 2003).

Moreover, the Ninth Circuit has repeatedly admonished that the court will not “manufacture arguments for an appellant” and therefore will not consider claims that were not actually argued in appellant’s opening brief. *Greenwood v. Fed. Aviation Admin.*, 28 F.3d 971, 977 (9th Cir. 1994). Because Plaintiff failed to provide adequate briefing, the Court declines to consider the issue.

Third, Plaintiff argued that the ALJ failed to properly compare the specific demands of her past relevant work with her specific functional limitations by only relying on the vocational expert’s testimony. ECF No. 14 at 18-19.

The Ninth Circuit has held that requiring the ALJ to make specific findings on the record at each phase of the step four analysis allows for meaningful judicial review. *Pinto v. Massanari*, 249 F.3d at 847. When the ALJ “makes findings only about the claimant’s limitations, and the remainder of the step four assessment takes place in the [vocational expert’s] head, we are left with nothing to review.” *Id. quoting Winfrey v. Chater*, 92 F.3d 1017, 1025 (10th Cir. 1996).

Here, the analysis concerning Plaintiff’s past relevant work as generally performed did not occur in the vocational expert’s head. At the hearing, the vocational expert testified that based on the ALJ’s hypothetical, which mirrored

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<sup>8</sup>Under the current version of the Federal Rules of Appellate Procedure, the appropriate citation would be to FED. R. APP. P. 28(a)(8)(A).



1 the residual functional capacity determination for August 22, 2011, to October 31,  
2 2012, and November 1, 2013, to the date of the decision, Plaintiff could perform  
3 the occupations of cook helper, rod tape operator, tractor trailer driver, “truck  
4 driver, light,” and dump truck driver as described in the Dictionary of  
5 Occupational Titles (DOT). Tr. 93-94. Furthermore, the vocational expert agreed  
6 to clarify when her testimony was inconsistent with the DOT and did not testify to  
7 any such deviation occurring in regards to the above testimony. Tr. 87-94.  
8 Considering the DOT is usually the best source for how a job is generally  
9 performed and the vocational expert’s testimony did not vary from the DOT, the  
10 comparison between the requirements of Plaintiff’s past relevant jobs as generally  
11 performed with the residual functional capacity determination did not occur solely  
12 in the vocational expert’s head. The DOT is available in print for Plaintiff to  
13 compare to the residual functional capacity determination. Thus, the ALJ fulfilled  
14 her third factual finding.

15 Thus, the Court finds that the step four determination was free of error as to  
16 Plaintiff’s ability to perform past relevant work as generally performed in the  
17 national economy.

#### 18 **D. Step Five**

19 Plaintiff argues the ALJ erred at step five because she relied on the  
20 vocational expert’s testimony, which was based on an incomplete hypothetical.  
21 ECF No. 14 at 19-20.

22 A claimant’s residual functional capacity is “the most [a claimant] can still  
23 do despite [her] limitations.” 20 C.F.R. § 416.945(a). In formulating a residual  
24 functional capacity, the ALJ weighs medical and other source opinions and also  
25 considers the claimant’s credibility and ability to perform daily activities. *See,*  
26 *e.g., Bray v. Comm’r, Soc. Sec. Admin.*, 554 F.3d 1219, 1226 (9th Cir. 2009). An  
27 ALJ is only required to present the VE with those limitations the ALJ finds to be  
28 credible and supported by the evidence. *Osenbrock v. Apfel*, 240 F.3d 1157, 1165-

66 (9th Cir. 2001).

Here, the ALJ presented her residual functional capacity determination to the vocational expert and the vocational expert identified jobs. Tr. 94-97. Considering this Court has already determined that the ALJ did not error in her treatment of the opinions of Dr. Moon, Dr. Kouzes, Dr. Sampson, and Mr. Carpenter, the ALJ's step five determination is without error.

### CONCLUSION

Having reviewed the record and the ALJ's findings, the Court finds the ALJ's decision is supported by substantial evidence and free of harmful legal error. Accordingly, **IT IS ORDERED:**

1. Defendant's Motion for Summary Judgment, **ECF No. 18**, is **GRANTED**.

2. Plaintiff's Motion for Summary Judgment, **ECF No. 14**, is **DENIED**.

The District Court Executive is directed to file this Order and provide a copy to counsel for Plaintiff and Defendant. **Judgment shall be entered for Defendant** and the file shall be **CLOSED**.

DATED August 2, 2016.



A handwritten signature in black ink, appearing to be "M" or "Rodgers", written over a horizontal line.

JOHN T. RODGERS  
UNITED STATES MAGISTRATE JUDGE